

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE      |
|---------------------------|----------|--------|-----------|
| FEE DETERMINATION         | T.D.     |        | 12/21/99  |
| O.I.P.E. CLASSIFIER       | EW       | 32     | 1/5/00    |
| FORMALITY REVIEW          |          |        |           |
| RESPONSE FORMALITY REVIEW | LH       | 40105  | 1-19-2000 |

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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